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Date: 8/9/05

To: Commissioner for Patents

Fax: (571) 273-8300

From: Raymond R. Ferrera, Esq.

Pages: 3 (including cover page)

Re: *A New Obstetrical Vacuum Extractor with a
Pull-Sensing Handle Grip*

Serial No.: 10 / 615,566

Our ref.: P31343US

Comments: Please see the attached.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

AUG 09 2005

In re Application of: Nicola Perone	§	Group Art Unit:	<i>unknown</i>
Application No.:	10 / 615,566	§	
Date Filed:	July 8, 2003	§	Examiner: <i>unknown</i>
Title: A New Obstetrical Vacuum Extractor with a Pull-Sensing Handle Grip	§	Docket No.:	P31343US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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I hereby certify that this Revocation and Power of Attorney is being
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Longdo
Signature August 9, 2005
Date

Dear Sirs:

TRANSMITTAL LETTER

Transmitted herewith for filing in the above-identified case is a Revocation of Power of Attorney form executed by Nicola Perone, the applicant/inventor of the above-identified case.

No fee is believed to be due with the submission of this document, however, the Commissioner is hereby authorized to charge Deposit Account No. 01-2511 for any underpayment of the fees required under 37 CFR §§ 1.16-1.17, or credit the account for any overpayment.

Respectfully submitted,

Date: August 9, 2005

By:

Ray Ferrera
Raymond R. Ferrera
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From: 713 868 1179 Page: 4/4 Date: 8/9/2005 3:45:27 PM

PTO/SB/82 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/615,566
Filing Date	07/08/03
First Named Inventor	Perone
Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	P31343US

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint the practitioners associated with the Customer Number:

28805

 Please change the correspondence address for the above-identified application to: The address associated with
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OR

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Address

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Country

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Nicola Perone

Date

8/19/05

Telephone

713/868-1168

NOTE: Signatures of all inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form, and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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